

CITY OF BAINBRIDGE ISLAND
**PREAPPLICATION CONFERENCE REQUEST
 COMPREHENSIVE PLAN AMENDMENT – SITE
 SPECIFIC**

FORM MUST BE COMPLETED IN INK, PREFERABLY BLUE.
 PENCIL WILL NOT BE ACCEPTED.



DATE STAMP FOR CITY USE ONLY	<u>TO BE FILLED OUT BY APPLICANT</u>	
	PROJECT NAME:	
	TAX ASSESSOR'S NUMBER: _____	

	PROJECT STREET ADDRESS OR ACCESS STREET:	
	ENVIRONMENTAL CHECKLIST SUBMITTED : <input type="checkbox"/> YES <input type="checkbox"/> NO	
	<u>FOR CITY USE ONLY</u>	
	FILE NUMBER:	
	PROJECT NUMBER:	
DATE RECEIVED:		
APPLICATION FEE:		
TREASURER'S RECEIPT NUMBER:		
SUBMITTAL REQUIREMENTS		
APPLICATION	<i>One original (which must contain an original signature) and three copies</i> must be provided. Whenever possible, originals must be <i>signed in blue</i> . Please identify the original document.	
SUPPORTING DOCUMENTS	<i>One original (which must contain an original signature)</i> , where applicable, and <i>three copies</i> (if an original is not applicable, <i>four copies</i> must be provided).	
FULL-SIZE DRAWINGS	<i>Three copies</i> of the required drawings must be provided. Drawings <i>must be folded and 18" x 24"</i> in size. <i>No construction drawings or other sized drawings</i> will be accepted unless specifically requested.	
SUBMITTING APPLICATIONS	Applications <i>must be submitted in person</i> by either the owner or the owner's designated agent. Should an agent submit the application, a <i>notarized Owner/Agent Agreement</i> must accompany the application.	
FEES	See Fee Schedule in the Planning Department or on the City's website under <i>documents, forms & apps</i> .	

DEPARTMENT OF PLANNING AND COMMUNITY DEVELOPMENT
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www.ci.bainbridge-isl.wa.us

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GENERAL INFORMATION

1. Name of property owner: _____
Address: _____
Phone: _____ Fax: _____
E-mail: _____

Name of property owner: _____
Address: _____
Phone: _____ Fax: _____
E-mail: _____

*If the owner(s) of record as shown by the county assessor's office is (are) not the agent,
the owner's (owners') signed and notarized authorization(s) must accompany this application.*

2. Authorized agent: _____
Address: _____
Phone: _____ Fax: _____
E-mail: _____

3. Person responsible for payment: _____
Address: _____
Phone: _____ Fax: _____
E-mail: _____

4. Project Contact: _____
Address: _____
Phone: _____ Fax: _____
E-mail: _____

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5. Description of proposed amendment, including proposed changes to the Land Use Map:

6. Driving directions to site: _____

7. Please give the following existing parcel information:

Assessor's Parcel Number: _____

Parcel Owner: _____

8. Short Legal description (or attach): _____

9. Current comprehensive plan, zoning and shoreline designations and use of subject parcel(s):

Lot Number	Comp Plan Designation	Zoning Designation	Shoreline Designation	Current Use
Lot				
Lot				
Lot				
Lot				

10. Does the site contain an environmentally sensitive area as defined in Critical Areas Ordinance (*Bainbridge Island Municipal Code* Chapter 16.20)?

☐ yes ☐ no ☐ unknown

If yes, check as appropriate:

<input type="checkbox"/> wetland	<input type="checkbox"/> geologically hazardous area
<input type="checkbox"/> wetland buffer	<input type="checkbox"/> zone of influence
<input type="checkbox"/> stream	<input type="checkbox"/> slope buffer
<input type="checkbox"/> stream buffer	<input type="checkbox"/> fish and wildlife habitat area

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[illegible]

I hereby certify that I have read this application and know the same to be true and correct.

*Signature of owner or authorized agent

Date _____

Please Print

**If signatory is not the owner of record, the attached "Owner/Agent Agreement" must be signed and notarized.*

Owner/Agent Agreement

The undersigned is (are) the owner(s) of record of the property identified by the Kitsap County Assessor's account number _____, located at _____, Bainbridge Island, Washington. The undersigned hereby gives (give) consent and approval to _____

to act on his/her (their) behalf as his/her (their) agent to proceed with an application for (please

check all items that apply):

- ☐ preapplication conference
☐ planning permits
☐ construction permits (i.e. building, water/sewer availability, right-of-way, etc)

on the property referenced herein. This agreement authorizes the agent to act on the owner's behalf for the above checked applications through (date or specific phase) _____.

Owner of record

Date

Owner of record

Date

STATE OF WASHINGTON)
) SS.
COUNTY OF KITSAP)

On this _____ day of _____, 20____, before me, the undersigned, a Notary Public in and for the State of Washington, duly commissioned and sworn, personally appeared:

to me known as the individual(s) described in and who executed the foregoing instrument, and acknowledged to me that he/she/they signed and sealed the said instrument, as his/her/their free and voluntary act and deed for the uses and purposes therein mentioned, and on oath stated that he/she/they was (were) authorized to execute said instrument.

WITNESS MY HAND AND OFFICIAL SEAL, hereto affixed the day and year in this certificate above written.

Notary Public in and for the State of Washington

Residing at _____

My appointment expires: _____